FOR INSTRUCTIONS, SEE BACK OF FORM		FORM	STATEMENT
CHECK ONE:		DR-1	STATEMENT
	Reset Form	(Rev. 8/2011)	ORGANIZATION
Statement must be filed within 10 days of committee accepting and it		For Office Use	Only
incurring debts exceeding \$750. Amendments must be filed within 30 de	Bys of a change.	Comm. #	036
Effective January 1, 2011, ONLY county/local committees with less than using these forms. All other committees must file their statements and re		Indexed	
of the statements and re	eports electronically.	Computer	
COMMITTEE NAME ↓ ↓ (A candidate's committee must include put old name in ().	the candidate's last name in the name o	f the committee.) If a	amending committee name,
BENSLEY FOR SUPERVISOR			
IMPORTANT: Indicate type of committee you are reporting for: 5			
	2)Statewide PAC (3)State Party (4	County Control Co	
(5) County Candidate (6) City Candidate (7) School Board or Other (10) School Board or Other Political Subdivision PAC (11) Ballot Is	er Political Subdivision Candidate (8	County PAC (9)	city PAC
COMMITTEE TREASURER (mandatory for all committees)			
Name ↓ ↓ JACK BENSLEY	Name ↓ ↓		andidate's committee)
Mailing Address PO BOX 59	JOAN GODBERSEN	V	
City State J. Zin Code J. J.	Mailing Address PO BOX 345		
City, State ODEBOLT A 51458	City, State ↓ ↓ Zip Code ↓ ↓ ODEBOLT IA 51458		2
Phone 712)668-2807	Phone 712)668-4474		A 2 3
e-Mail jrbensley1@hotmail.com	e-Mail jgdbrsn@netins.net		
INDICATE PURPOSE OF COMMITTEE - Check One Box A	dvocate for/against candidate(s) Ad	vocate for ballot issu	ue(s)
All Candidates Enter:	I I Ad	vocate against hallo	ticcuo(a)
Office Sought: COUNTY SUPERVISOR	County/Local Candidates ar	id Ballot Issue Con	nmittees Enter:
Political Party (if applicable) INDEPENDENT	County: SAC		SH SH SH
District: ONE	(If active in multiple ballot issu	e elections, attach li	
Year Standing for Election: 2012	Date of Election: 11/06/201	2	<u> </u>
Bank Account Name (must match committee name)	Candidate name & Address or Pa	rent Entity (PACs	f applicable)
BENSLEY FOR SUPERVISOR	↓↓	filiate, or Sponsor	r applicable),
	JACK BENSLEY		
Name of Financial Institution/type of Account	Mailing Address ↓ ↓		
UNITED BANK OF IOWA	PO BOX 59		
Mailing Address ↓ ↓	014	State ↓ ↓	Zip ↓ ↓
PO BOX 456	ODEBOLT	IA	51458
City \downarrow \downarrow State \downarrow \downarrow Zip \downarrow \downarrow ODEBOLT IA 51458	Phone (712) 668-2807		51458
	e-Mail jrbensley1@hotmail.co	m	
STATEMENT OF AFFIRMATION: By filing this document the committee aff			
 The committee and all persons connected with the committee understand that rules in Chapter 351 of the Iowa Administrative Code. 			
 That Iowa Code section 68A.402 and rule 351—4.9 require the filing of disclosubjects the candidate or chairperson (in the case of committees other than a caimposition of other criminal and civil sanctions. 	sure reports and that the failure to file these indidate's committee) to the automatic asse	e reports on or before ssment of a civil pena	the required due dates
 That lowa Code section 68A.405 and rules 351—4.38 through 4.43 require th materials except for those items exempted by statute or rule. A committee that v does not intend to cross the \$750 filing threshold shall file the Form DR-SFA form 	e placement of the words "paid for by" and		
That lowa Code section 68A.503 and rules 351—4.44 through 4.52 prohibit the A candidate and a candidate's committee may select the section of the control of the contr			
5. A candidate and a candidate's committee may only expend campaign funds a	s permitted by lown code and and	ommittees except for	ballot issue PACs.
6. That the committee will continue to file disclosure reports until all activity has dissolution (DR-3) has been filed.	ceased, committee funds spent, debts resol	through 68A.303 and ved, and a final repor	d rule 351—4.25.
V. R. B. O. alas.			H 199 33
Signature of Treasurer	8-29-1	2	
		Pata Signad	

Signature of Candidate, OR, for all other committees, Chairperson

8-29-/2-Date Signed

8-29-12 Date Signed